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Leveraging the Black barbershop as a community haven exploring perceptions of mental health  
in Black men

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2023

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## **Abstract**

Leveraging the Black barbershop as a community haven exploring perceptions of mental health in Black men

By De'Von Cross

Compared to the general U.S. population, Black men tend to experience relatively poor health outcomes, many of which are the downstream effects of social determinants of health. In addition, Black men are subject to a high incidence of non-communicable diseases (NCD) that result from a combination of genetic, physiological, environmental, and behavioral factors (tobacco use, physical inactivity, and unhealthy diet). Of the NCDs commonly explored through research, such as hypertension, Type II diabetes, various cancers, hyperlipidemia, and asthma, mental illness is a NCD that characteristically goes unaddressed and is therefore under-researched. In addition, there exists stigmas within health-related spaces that have historically ostracized Black men from feeling a sense of inclusion and identity, therefore acting as inflammatory to a community that is desperately in need of culturally sensitive and patient-centered care. The purpose of this study is therefore to explore how utilizing the barbershop setting as a community-identifiable haven might assist Black men in navigating their attitudes and perceptions of mental health, its associated norms, and stigmas (including those involving masculine identity), and barriers such norms pose to successful facilitation or implementation of mental health services and interventions. In achieving this aim, the study will take an exploratory qualitative approach that uses elements of phenomenology to A) understand the experience of the barbershop-setting vis-à-vis the participants and B) construct a working theory on how utilizing spaces such as the barbershop can serve as a catalyst for change in addressing mental health and elements of well-being among Black men.

Leveraging the Black Barbershop as a Community-Identifiable Safe Space Exploring  
Perceptions of Well-being and Mental Health in Black Men

By

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I would like to thank the participants of this study for taking the time out of their day to discuss with me the significance of a cultural staple within the Black community, specifically for Black men, and to be willing to be vulnerable regarding matters of mental health and well-being. Their contributions may very well lay the foundation for exploring the ways that spaces in a community setting can be leveraged to explore and address matters of both mental health and general health for Black men and various communities at large.

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## Chapter 1: Introduction

### Rationale

Black men are subject to a high incidence of non-communicable diseases (NCD) that result from a combination of genetic, physiological, environmental, and behavioral factors (tobacco use, physical inactivity, and unhealthy diet). Some of the specific NCDs that disproportionately affect Black men include hypertension, Type II diabetes, various cancers, hyperlipidemia, and asthma – all of which are strongly linked to socioeconomic barriers (poverty, economic instability) that are rooted in racism (Ellis et al., 2020, WHO, 2021). One NCD that disproportionately affects Black men is that of mental illness, a collection of conditions that remain highly stigmatized as compared to other types of NCDs. According to the U.S. Department of Health and Human Services' Office of Minority Health, Black adults living below the poverty line are more than twice as likely to report serious psychological distress as U.S. adults who enjoy greater financial security (OMH, 2022). However, a systematic review focusing on depression among African American/Black men in the U.S. found that over a 25-year time span, only 19 empirical studies were identified (Ward, 2013). Of these studies, the depression prevalence among African American men ranged between 5% to 10% and risk factors included ethnicity and gender, income, education, socioeconomic positioning, poverty status, employment, along with low use of mental health services (Ward, 2013).

A more recent study focused on major depressive disorder (MDD) among African Americans, and other non-specified minority groups, found that people in these populations are less likely to suffer from acute episodes of MDD than Caucasians, but more likely to suffer from prolonged, chronic, and severely debilitating depression with heavy consequences on daily



functioning (Bailey et al., 2019). Notable barriers to treatment in African Americans were attributed to provider underdiagnosis of diseases, along with an inability of providers to note subtleties and uncommon presentation differences in African Americans when compared to their Caucasian counterparts (Bailey et al., 2019). The underdiagnosis of mental health disorders is a testament to a larger issue in addressing health needs within Black communities – namely, a lack of readily available, affordable, and trusted resources to navigate mental health needs. As such, identifying innovative approaches to implement mental health resources in the Black community is paramount. While there have been numerous studies examining the causes of negative health outcomes among Black men, there is less reporting in the literature regarding how to effectively reach them through interventions delivered in culturally-appropriate venues – especially in relation to mental health and general wellbeing of which this study aims to identify and explore.

### **Purpose Statement**

The purpose of this study is to explore how utilizing the barbershop setting as a community-identifiable “safe space” might assist Black men in navigating their attitudes and perceptions of mental health, its associated norms, and stigmas (including those involving masculine identity), and barriers such norms pose to successful facilitation or implementation of mental health services and interventions.

### **Research Questions & Aims**

The following research questions (RQ) and aims (A) guide this study:

RQ1: How do Black men in Atlanta perceive and understand the barbershop setting as a community and cultural space? What functions does this space offer beyond its commercial activities?

SQ1. What is the relevance of the barbershop space for their personal identity?

RQ2: In what ways do the participants believe the barbershop space supports mental health among Black men, if any? How might this space be further leveraged for this purpose?

### **Significance Statement**

The findings of this study could contribute to evidence-based approaches exploring innovative ways to leverage communal spaces when navigating matters of mental health for Black men. By investigating the perceptions of Black men and the cultural relevance of the barbershop, it is expected that new concepts can be captured towards understanding and implementing effective practices to offer health-related services in community spaces beyond the traditional healthcare setting: Doctor's office, hospital, clinic, etc. In addition, it's imperative to identify ways to close the gaps related to healthcare access for underserved and underrepresented populations all the same, while ensuring these health spaces delivering care are representative and protective of the persons receiving care without needing to remove them from the environments they most readily identify with. To increase the presence and efficacy of community-based health interventions with focus' central to mental health and general wellbeing of individuals, healthier outcomes can be better realized, particularly within communities that are far too often ostracized from receiving quality care due to lack of resources, access, and the various socio-economic blockades that facilitate race-based medicine that often serves as a barrier to care for minority serving populations.

## Chapter 2: Review of Literature

### Introduction

Within the African American community, men have some of the worst health outcomes, especially when compared to the general U.S. population (Gilbert et al., 2016). Black men also experience higher rates of poverty and lower median household income than men in other racial or ethnic groups (Bloome, 2014). This combination of factors, which yields negative health outcomes, demands a systematic change in how the health issues of Black men are addressed, with a primary focus being placed on the identification of solutions to rectify the health disparities they experience (Jones et al., 2012). Accommodating these factors is an ever-growing disparity of mental health illnesses among African American men, but with little resources or approaches available to address them.

### Mental Health & Black Men

Mental health remains a topic highly stigmatized within the Black community, and Black men are further ostracized from conversations of mental health in a therapeutic capacity due to various socio-cultural norms that would deem such discussions as taboo and/or less masculine. Adding to this, is the lack of research done exploring interventions for Black men's mental health, which could pose as a barrier for identifying useful resources and innovative approaches for this target population. Literature that seeks to correlate the influence of social determinants of health (SDOH) on African American's mental health, and specifically depression in the US, is lacking (Yelton et al., 2022). In addition, not much literature is available exploring the mental health of Black men and innovative approaches leveraging community spaces to increase access to mental health services (Yelton et al., 2022).

There are studies that exist to cross-examine the influence that police-based trauma has on the mental health burden of Black men, however. Additionally, there are studies examining the correlation of drug use and risky behaviors among men who sleep with men underscoring mental health as a common denominator within this community; however, little research has been conducted examining the usefulness of safe spaces within the Black community to bridge access to mental health services for Black/African American men. In this section, the available literature will be reviewed and the implications of broad stigmatizations within this community will be evaluated.

### *Shortage of Resources*

In a systematic review with inclusion criteria focused on depression among African American or Black men with separated analysis by race and gender, and conducted within the U.S, it was found that over a 25-year time span, only 19 empirical studies focusing on depression in African American men were identified (Ward et al., 2013). Of the studies identified, findings suggest depression prevalence among African American men ranged between 5% to 10%, in the presence of several risk factors, yet experience low use of mental health services (Ward et al., 2013). Additionally, in a 2001 study focusing on barriers to mental health services for African Americans, it was found that compared to Caucasians, mentally ill African Americans have more chronic disease, higher levels of disability, higher rates of inpatient service use, lower rates of outpatient mental health service use, and more barriers to seeking mental health treatment (Snowden, 2001).

While research over the last decade has increased in focus on African Americans with mental illness, a common theme lacking is the examination of gender and age within this population. More specifically, an unequal distribution of resources, that of which is economic in

nature, can manifest itself in age and gender discrepancies within the African American community. The compounded effects of these disadvantages for Black men reduces the chance of creating solutions that would ideally cater to the stated variables. Though it's been documented that from a socio-cultural perspective, many African Americans have the tendency to utilize religion or spirituality to supplement their health needs and experiences, most research evaluates this in the lens of Black women, highlighting conditions like cancer and depression as a facilitator for religious pursuits with little acknowledgement to conditions leading Black men to seek religious safe havens as well (Dessio et al., 2004).

Moreover, since the turn of the 21<sup>st</sup> century, African American women have experienced more economic advancement compared to African American men (Bowie, 2011), which may factor into why evidence supports that Black women tend to be more psychologically open to receiving mental health care and professional help due to both their higher levels of education and income when compared to Black men. According to the U.S. Department of Health and Human Services' Office of Minority Health, Black adults living below the poverty line are more than twice as likely to report serious psychological distress as U.S. adults who enjoy greater financial security (OMH, 2022). As such, identifying innovative approaches to funnel mental health resources into the African American community is vital, particularly those that focus on affordability and amplifying trusted and frequented spaces within the community that African American men work and live.

### *The Atlanta Context: Health Inequities and Income Inequality*

Atlanta to many is the Black mecca of the South and perhaps the country. With such a huge Black population characterized as a melting-pot in the heart of Georgia comes with it the vast health inequities and income inequalities that facilitate barriers to care and gaps in

healthcare access for many. However, while gaps exist in the healthcare context, there are still places frequented within the Black community - particularly amongst Black men - that hold space and opportunities to facilitate culturally sensitive and patient-centered care that are readily accessible and made with Black men in mind: Barbershops, Churches, Gyms, Recreational Parks, and more. Recently, the AJC has documented high rates of income inequalities in the Atlanta and metro-Atlanta areas, spanning over the last decade (Jackson, 2022). According to the Atlanta Wealth Building Initiative, in 2022, the median household income for a Black family in Atlanta was \$28,000 compared to \$84,000 for their white counterparts, even though Black residents make up for half of the city's population (AWBI, 2020). With high rates in income inequality stands the often-aligned disparities of health attributed to lack of health access, low literacy levels, poverty and increased mental health incidence and prevalence.

Given this income inequality, exploring treatment options centered around mental health are often neglected given that most aren't covered under traditional health plans. Furthermore, those who are uninsured face an existential crisis of discerning what daily needs are required to survive and what funds can be allocated to necessities of daily living, to which point mental health needs are generally placed on hold regardless of how significant they may be. Similarly, if Black men experience the ill effects of income inequality such as poverty, it's likely that health insurance isn't a viable option due to lack of employment or working jobs where health insurance simply isn't offered. To that effect, matters of mental health services generally go underutilized, if available, due to stigmatizations around mental health occurrences from a socio-cultural perspective, some of which can largely be attributed to ideologies of loosely defined *manhood* or barriers under religious reasons.

Beyond stigmas, location and one's built environment prove to be inflammatory to the disparities witnessed as well. Specifically, within the Atlanta area, there exists health inequities largely isolated by zip-codes and exacerbated by the effects of gentrification with the inclusions of West-Midtown, the expansion of the beltline, and numerous home developments catering to middle and upper-class non-Black persons along Atlanta's historic West-End Community. As these efforts of gentrification bolster, so does the displacement of many low-income individuals, namely the Black and Brown inhabitants of these developing communities. What are met with these developments are an inflammatory reaction of the social determinants of health leading to a wide range of health issues and poor health outcomes plaguing the individuals within these areas, often resulting in increased mental health events that go undiagnosed and untreated among communities of color (Bailey et al., 2017).

Nevertheless, while there may exist layered complexities as to the drivers of poor health, particularly mental health within the Black or African American community, programs such as *Safe Black Space* have pioneered initiatives to lead the change. Under Dr. Kristee Haggins, a founding member of *Safe Black Space*, the organization aims to provide culturally specific strategies and resources to help Black people heal from historical and current wounds, both individually and collectively but within the context of spaces the community deems safe (Haggins et al., 2023). In addition, programs such as this seek to explore the usefulness of bridging community safe-spaces and mental health/wellness services to increase access and care for Black men, therefore yielding better health outcomes in matters of mental health. In addition, while various initiatives such as hypertension screening and prostate teachings have been examined within a barbershop setting in the literature, there is still a clear lack in assessing

mental health holistically within the barbershop-setting from a mere explorative approach, and therefore more studies are needed.

#### *Attitudes & Beliefs: Social Constructs*

Several studies have been conducted that explore Black men's beliefs about mental illness and how it contributes to how they perceive themselves. For example, a study by Ward & Besson (2012) utilizes the Common Sense Model (CSM) as a guide to examining common sense beliefs and representations about illnesses that influence how Black men cope with health threats and illness. More specifically, this study by Ward & Besson presents the CSM representation as a set of beliefs about the identity or symptoms, cause, timeline, consequences, control and treatment, illness coherence (understanding of the illness), and emotional impact of the health threat or illness on Black men (Ward & Besson, 2012). In a similar study focused on African Americans in 2010, it was revealed that participants viewed mental illness, particularly depression, as a weakness (Conner et al., 2010), where the CSM builds upon such pre-existing frameworks.

In addition, many stigmas exist that cause individuals to resist seeking various mental health treatment modalities, and therefore prompt them to seek traditionally accepted modalities of help within their culture to achieve any sense of therapeutic effect without suffering from ridicule. Such ridicule is characterized as being through the church and various religious or social settings even if more targeted approaches or treatments are necessary. Beyond the church and religion, extending into broader concepts of socialization of Black men, Nicholas (2000) postulates that men are socialized to believe that they are invulnerable to illness, and that asking for help is a sign of weakness. This resistance to *feeling* may also be responsible for why men, particularly Black, minimize pain and suppress the expression of need, likely contributing to the



reduced engagement witnessed in preventative health visits when compared to other racial groups (Courtenay, 2000; Williams, 2003). Black men's sense of identity is therefore likely to be influenced by their ability to live-up-to these socializations they've been grouped into, where their inability to do so may lead to identity suppression, role confusion, and maladaptive coping mechanisms, all contributing to mental health illnesses and events (Jackson et al., 2010).

### **Efficacy of Community Safe-Spaces**

While there have been numerous studies examining the causes, determinants, and negative health outcomes for Black men, there is less report in the literature about how to effectively reach them through interventions delivered in culturally appropriate venues, specifically to address issues of mental health and general wellbeing. However, of the research that has been conducted, there is evidence that suggests that community staples or assets, such as salons, barbershops, and churches, serve as culturally acceptable locations for reaching African Americans with health information (Releford et al., 2010). Therefore, successfully navigating these spaces may assist in combatting both institutional and socio-cultural barriers in accessing health care - both as a system and resource – while providing the opportunity to delve into the experiences of black boys and men that shape their health attitudes and behaviors (Linnan et al., 2007). In addition, studies have also highlighted that barbershops and sporting venues are among the most preferred communication means for discussing health information targeting black men (Allen et al., 2007), given that men are characterized by lower church attendance, particularly when compared to women in their respective communities (Grant et al., 2012).

### *Barbers, Black Men & The Barbershop*

For African American men, barbershops are an important means of conducting culturally-appropriate and relevant news happening within and outside of the community, while also being

a successful avenue to navigate complex conversations surrounding health. Additionally, this is what makes them a potentially successful avenue to navigate complex conversations surrounding health. For example, in a nonrandomized efficacy trial in which barbers were trained to provide health literacy for hypertension, it was reported that hypertension control in the treatment group increased from 47% to 92% while remaining unchanged in the control group (Hess et al., 2007). In a follow-up study, the researchers reported the results of a randomized clinical trial and found that barbers can effectively impact their customers' hypertension control rate, with an 8.8 % absolute group difference between intervention and control groups (Victor et al., 2011).

In other studies where barbers were trained to disseminate health information among African American men for the purposes of increasing health literacy, knowledge of various health conditions increased significantly and were demonstrated to have been upheld over time (Luque et al., 2014). While much health behavior interventions for the African American community have centered on faith-based organizations historically, it's been found that church venues – while significant – may pose barriers across generations of Black youth and elders, as the latter is more likely to utilize the church than the former. However, an important note to consider is that akin to the church, barbershops serve as a more frequented and more revered space for Black boys and men, largely due to the cultural constructs such as communalism and expressiveness. Both of which yield a more productive space for sociocultural influences of behavior to be explored and leveraged through the barbershop setting compared to other venues of similar sort (Palmer et al., 2021). Overall, it appears that using the barbershop setting to disseminate health information must come from a trusted source, primarily the stakeholders of the barbershop next to the clients themselves: the barbers.

### *Wellbeing & the Barbershop*

Despite research suggesting that the barbershop is highly conducive to disseminating health information and strengthening health literacy with respect to health outcomes for NCDs, very few studies have focused on the possibilities of leveraging this same setting for the same effects related to mental health. One study's secondary aim in evaluating implications of the effectiveness of the barbershop model in the health promotion of African American men were to explore their relative acceptance of receiving health and mental health services in the barbershop (Moore et al., 2016). In a separate study of 10 men ranging between the Los Angeles and San Bernardino Counties of Southern California, researchers implemented a video voice participatory action and research qualitative methodology to explore African American (or Black) men's experiences using community barbershops as informal mental health settings (Curry et al., 2022). Their study suggested that African Americans were willing to engage in conversations of their mental health within their barbershops and that their experiences therein contributed greatly to their psychological, emotional, and social wellbeing (Curry et al., 2022).

### **Existing Efforts to Use Barbershops in Support of Mental Health**

Initiatives are underway in various communities globally to evaluate the usefulness of leveraging the barbershop setting to aid in mental health problems for men. While it's apparent that women are more likely to seek therapy, particularly individual therapy, the problem lies in creating spaces frequented by men designed with the intention of serving as a therapeutic environment to address issues of mental health. Incidentally, there has become a more pressing need for these therapeutic spaces considering the COVID-19 pandemic and its exacerbation of mental illnesses globally. One example is a 2022 study conducted in the UK evaluating client's mental health retrospectively during the COVID-19 pandemic. A thematic analysis identified

three overarching themes: ‘more than a haircut’ (describing how the physical and relational contexts of barbershops can offer a supportive environment for clients); ‘impacts of COVID-19’ (describing stressors related to the pandemic and implications for clients’ mental health and barber–client relationships); and ‘formal mental health strategies’ (describing opportunities for, and potential barriers to, formalizing mental health support in barbershops) (Ogborn et al., 2022). It was made evident through this study that many barbers were able to recognize and monitor the mental health statuses of their clients; however, what also presented were the rightful concerns that barbers may be overstepping their “role” without having appropriate training to manage mental health conditions and in the context of the competing workplace demands (Ogborn et al., 2022). What came of this initiative was barbers decided that to better supplement their lack of clinical or behavioral training, and the therapeutic conversation deemed “barbershop talk”, that using posters and leaflets sharing in-depth and relevant mental health information may be ideal moving forward in the barbershop context. Adding to this, it was to be appreciated that while the barbershop setting is seen as a therapy for many men, there exists issues of confidentiality that could serve as a limiting factor given the proximity of most barber chairs in a traditional barbershop setting.

Another initiative exists under the National Institute on Minority Health and Health Disparities (NIMHD). Through the Health Advocates In-Reach and Research (HAIR) program at the University of Maryland (UMD) Center for Health Equity, a health advocate and barber, Michael Brown, works with clients to provide both barbering services and routine health screenings where he facilitates dialogues pertaining to mental health and the importance of regular checkups. With aims of transforming health, Dr. Stephen Thomas, Ph.D., professor in the UMD School of Public Health and director of the Center for Health Equity aims to create a

national network of barbershops and salons, each partnering with a university and local hospital to address the health needs of their communities on an ongoing basis (NIH, 2019).

Though there are attempts to fill in the gap that exist between mental health treatment and Black men, a separate organization is attacking the mental health crisis of Black men head-on: The Confess Project of America. With a mission aimed to train barbers and stylists to become mental health advocates, having currently trained 2000+ barbers and stylist spanning over 48 cities and 28 states (Lewis, 2019), The Confess Project of America is changing the narrative by reducing stigmas that exist around mental health for Black men within the context of the barbershop setting. In effect, they've situated themselves to meet the people where they are, while empowering stakeholders of the barbershop and salon-setting to fill in the gap through mental health awareness and advocacy alike.

### **Summary**

Many barriers and stigmas exist and can be identified as it pertains to Black men's mental health and their willingness to receive care. Of the barriers that exist, healthcare and the historical mistreatment of Black and Brown communities of color within the United States certainly play a role. In addition, there are stigmas that exist more socially within the communities these individuals work and live that contribute to resistance of not only identifying matters of mental health, but also treating them in a therapeutic and patient-centered manner. Economically, Black men face barriers that may prevent them from utilizing resources to address issues of mental health and general well-being, as previously discussed. Moreover, cultural practices rooted in spirituality and religion may also facilitate one's resistance to discuss mental health. To circumvent these barriers and to survey these stigmas more intentionally, it is paramount that innovative approaches addressing mental-health-needs in the Black community

are explored. Healthcare providers and community-based groups have traditionally utilized barbershop settings and similar community-spaces to administer clinical care or screenings such as for hypertension, prostate cancer, and Type II Diabetes Mellitus; however, few have leveraged these spaces to explore attitudes and perceptions of mental health for this target population. The latter is the basis for which this study is purposed.

### Chapter 3: Manuscript

#### ABSTRACT

*Objective:* To explore the attitudes and perceptions of Black men aged 18-65 on how the barbershop-setting can be leveraged to address matters of mental health purposed for Black men in the Atlanta and metro-Atlanta areas.

*Methods:* Participants were selected on a first-come first-serve basis upon meeting enrollment criteria through surveys and the snow-balling method. Three focus group discussions were held using Zoom interface on three separate days, and transcriptions were created using Landscape & Associates transcription services. Codes and themes were created utilizing Maxqda, where thick descriptions were generated from the available qualitative data and further inferences were made.

*Results:* Participants identified the barbershop as both a safe-space and brave-space, as it enables Black men to experience an element of social freedom that isn't typically experienced beyond the barbershop-setting. While protective in this sense, the barbershop was also shown to have given men a sense of identity that allowed them to better escape the rigors of their community and the broader reaches of society, therefore serving as a protective factor for their mental health. Participants identifying as gay or bisexual found that the barbershop was purposed as a safe-space from a traditional or historical stance; however, for them it served as a brave space in-terms of gender identity and their ability to learn from cis-gendered heterosexual men on how to mirror such gender expression as a protective factor to navigate community and social settings to mitigate the risk of gender-based violence and homophobia until their coming-out-day.

*Conclusion:* For both Black cis-gendered heterosexual men and Black gay or bisexual men, the barbershop is deemed as therapeutic, though there are limitations to be explored and a repurposing of the barbershop-framework that is needed to be a more inclusive, therapeutic, and

healing space for all Black or African American men. This is particularly regarding the de-stigmatization of mental health illnesses and experiences within this community to drive future treatment approaches to better mitigate the risk of mental illnesses within this target population.

## **INTRODUCTION**

While there have been numerous studies examining the causes, determinants, and negative health outcomes for Black men, there is less report in the literature about how to effectively reach them through interventions delivered in culturally appropriate venues, specifically to address issues of mental health and general wellbeing. However, of the research that has been conducted, there is evidence that suggests that community staples or assets, such as salons, barbershops, and churches, serve as culturally acceptable locations for reaching Blacks and African Americans with health information (Releford et al, 2010). Therefore, successfully navigating these spaces may assist in combatting both institutional and socio-cultural barriers in accessing health care - both as a system and resource – while providing the opportunity to delve into the experiences of Black boys and men that shape their health attitudes and behaviors (Linnan et al, 2007). In addition, studies have also highlighted that barbershops and sporting venues are among the most preferred communication means for discussing health information targeting Black men (Allen et al, 2007), given that men are characterized by lower church attendance, particularly when compared to women in their respective communities (Grant et al, 2012).

For African American men, barbershops are a means of conducting culturally appropriate and relevant news happening both within and outside of the community, while also being a useful avenue to navigate complex conversations surrounding health, though health topics are usually less discussed. Given this, navigating the barbershop setting to disseminate health



information must come from a trusted source, primarily the stakeholders of the barbershop next to the clients themselves: The barbers. In studies where barbers were trained to disseminate health literacy and information among African American men, their knowledge of various health conditions increased significantly - and upon follow-up - knowledge gains were demonstrated to have been properly upheld over time, thus attributing to behavioral changes in the target population (Luque et al, 2014).

Moreover, in a nonrandomized efficacy trial held in the barbershop, where barbers were trained to provide health literacy for hypertension, it was reported that hypertension control in the treatment group increased from 47% to 92%, while having remained unchanged in the control group (Hess et al, 2007). In a follow-up study, the researchers reported the results of a randomized clinical trial and found that barbers can effectively impact their customers' hypertension control rate, with an 8.8 % absolute group difference between intervention and control groups (Victor et al, 2011).

Thus, this study seeks to explore how utilizing the barbershop setting as a community-identifiable-safe-space assists African American boys and men in navigating their attitudes and perceptions of mental health and its associated stigmas. More specifically, the aim is to assess how the barbershop setting further contributes to the facilitation of dialogues for this population regarding mental health and well-being through a collection of perspectives and experiences. If found to have significant impact among the population being measured, this study can provide insight to an innovative approach on how mental health practitioners, along with stakeholders of barbershops, clients, and the community can bridge the gap in how mental health issues within Black or African American boys and men are addressed. In addition, it may also provide

guidance on how various populations can leverage culturally relevant spaces within their communities to address health disparities related to mental health.

## **METHODS**

A general descriptive qualitative approach was chosen for this study as it was purposed strictly to explore the attitudes and perceptions of a concept within the barbershop-setting, more closely aligning with an ethnographic and phenomenological framework. Expedited IRB request was submitted, and the study was approved and exempt from further review as it met the criteria for exemption under 45 CFR 46.104(d)(2): Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behaviors (including visual or auditory recording). Informed consent was obtained virtually prior to conducting interviews, detailing the participants rights and autonomy to remain or withdraw from the study as he sees fit, if deemed necessary. In addition, participants were deidentified throughout the transcription process and thereafter to maintain confidentiality as best as possible. The research questions for the study are as follows:

**Final Research Question 1:** How do Black men in Atlanta perceive and understand the barbershop setting as a community and cultural space? What functions does this space offer beyond its commercial activities?

- **Sub-question:** What is the relevance of the barbershop space for their personal identity?

**Final Research Question 2:** In what ways do the participants believe the barbershop space supports mental health among Black men, if any? How might this space be further leveraged for this purpose?

### *Study Sample and Recruiting*

Purposive sampling of participants was conducted followed by snowballing to reach a broader set of the target population for this study. Inclusion criteria for the study was that you must identify as a Black or African American male, live in the Atlanta or metro-Atlanta area, receive haircuts in an Atlanta-based barbershop or have done so within the past five years, and be 18 – 65 years old. The goal sample size for this study was 20 to 25 participants, specifically 18-20 clients of the barbershop and 5-7 barbers. In total, 33 respondents were recruited, all having met inclusion criteria; however, of the 33 participants, 20 remained with the study, as others either expressed limited availability to participate or were not responsive to attempts of communication following initial recruitment efforts.

A survey was created using SurveyMonkey to assess eligibility of the study given the questions detailing the inclusion criteria. A QR code was generated for the survey and pasted onto a recruitment flyer used as an advertisement on the researcher's public personal social media profile (Instagram). Two months were allocated for recruitment efforts before beginning the study. Purposive sampling accounted for this first month of recruitment. Snowballing was leveraged for the second month of recruitment, that is to say that those who were recruited through utilization of the posted advertisements during the first month of recruitment were asked to leverage their personal or professional networks and share the recruitment flyer to gain more participants for the study. Personal organizations responsible for utilization of the snowball method were Black Greek Fraternities of whom various persons in the first month's recruitment method are members: Alpha Phi Alpha Fraternity, Incorporated., Iota Phi Theta Fraternity, Incorporated. Despite which recruitment method each participant was categorized in, all

participants were required to complete a survey to assess eligibility for the study based on inclusion criteria explained within it.

Those of who remained with the study throughout its entirety were clients, some had limited experience cutting hair - on themselves - or none, but none were licensed barbers and thus were all grouped as clients as it relates to their perspective of the barbershop setting. Attempts were made to recruit a fourth group composed solely of 3-5 barbers but efforts to organize a meeting time was unsuccessful due to conflicts of scheduling amongst the researcher and participants and was thus reserved for a future study at a date to be determined.

#### *Focus Group Discussions*

Interviews were composed as focus group discussion (FGD) guides, conducted in pursuit of the emic perspective, namely, to explore the perceptions of mental health and ways to address issues of mental health/illness within the barbershop context for Black/African American men. FGD guides were developed with questions being derived from three overarching categories: Wellbeing and the Barbershop, Barbers/Barbershop Talk, and Mental Health & Innovation. Prior to conducting interviews, the guides provided an in-depth review of the study's purpose and objective, ground-rules were reviewed within the FGD to establish an code of conduct between participants for each group, followed by a confidentiality statement and statement from participants acknowledging their understanding and willingness to continue with participation in the study. Emphasis was placed on the understanding of their option to remove themselves from the study at their discretion at any point in the process should they feel inclined.

Each of the three FGD's lasted between 1 – 2 ½ hours via Zoom interface, where participants were recorded for transcription purposes following their acknowledgment of the need for recording, a concise explanation of its purpose, the process of disposal following

production of transcripts, and their consent to record for the purpose of data collection and analysis. Fieldnotes were documented during the interview process to add real-time context to the conversation being had for later interpretation. Zoom interface was utilized as a means of convenience for participants, but also due to the difficulty in coordinating with local barbershop owners to open their shops after-hours to conduct the study

All transcripts were produced using a transcription service. Each audio recording was de-identified, reproduced with verbatim transcription, and redistributed to the researcher for continued data analysis to generate themes, codes, and further inferences to form a thick description exploring the research question. Codes were first identified using phrases or terms that frequently appeared through each focus group following analysis of each transcription and placed into a codebook. The codebook entailed a collection of words or phrases, with a defined meaning given participant responses, along with the direct quote the code was derived to give further context and relevance of the code generated. Next, codes were listed in a table and omitted or accepted based on relevance to the research question(s) established. Once ascertained, remaining codes were matched with relevance to each other and placed in groups such as *spirituality, church, and faith* or *comfort, safety, and bravery*, as an example. After codes were grouped together, themes were derived using quotes from participants with consideration for the context by which participants spoke and the category by which the question was asked relative to the focus group discussion guide produced. Thick descriptions were then made based on inductive analysis to give an in-dept review of the themes and codes generated given participant's thoughts, feelings, and perspectives explored within each discussion.

### *Reflexivity*

I want to explore how the barbershop can serve as a safe space for Black men to address matters of mental health, but also holistic wellbeing (physical, emotional, spiritual, and sexual). In doing so, I seek to understand the role that barbers can play in facilitating healthy dialogue to better shape health attitudes, behaviors, and practices for Black men within these trusted spaces. As an African American male, myself - functioning as both a Registered Nurse and barber – I understand the cultural significance of the barbershop from my own lens, but also have a dual experience in understanding the health disparities that plague Black men in various communities of color, along with the barriers to them receiving the care they need both clinically and behaviorally. In addition, there exists historical mistrust between the Black community and healthcare, particularly within the United States, that facilitates the medical distrust that also extends into the mental health realms of healthcare. Given the medical mistrust that exists within the Black community, there is a pressing need to identify innovative approaches to meet Black men where they are, particularly regarding matters of mental health.

As such, identifying approaches to deliver culturally sensitive and patient-centered care is critical, particularly in locations that are deemed safe beyond the traditional healthcare setting. The use of safe spaces is an emerging topic of exploration in qualitative research studies. While navigating safe-spaces to better understand and connect with communities across differing cultural lines and practices is invaluable, it's equally important to analyze how safe-spaces can be used to address mistrust and barriers to health and wellbeing within vulnerable and marginalized populations.

## RESULTS

In total, 18 participants responded to the survey during the first month of recruitment. 15 individuals were recruited via the snowball method during the second month of recruitment efforts. Attrition accounted for 13 of the 33 participants having dropped from the study due to scheduling conflicts or lapses in communication. 20 participants remained with the study throughout its entirety. Those of who remained with the study throughout its entirety were clients, some had limited experience cutting hair on themselves or none, but none were licensed barbers and thus were all grouped as clients as it relates to their perspective of the barbershop setting. Attempts were made to recruit a fourth group composed solely of 3-5 barbers but attempts to organize a meeting time was unsuccessful due to conflicts of scheduling amongst the researcher and participants and was thus reserved for a future study at a date to be determined. Participants had the autonomy to choose between three dates to join the focus group discussion. Originally, 7 were planned for the first focus group, 7 for the second, and 6 for the third; however, 4 individuals stated that it would be more convenient for them to attend the first focus group in short notice, which the research obliged given the time-sensitive nature of the study.

The final participant attendance for each focus group is below:

- Final participant count for focus group 1: 11
- Final participant count for focus group 2: 5
- Final participant count for focus group 3: 4

### *Theme 1: Defining the barbershop as a “safe-space” and “brave-space”*

Related codes: Community Space (Barbershop vs Church, Social interactions, Ritual); Cultural Space for Black men (Barbershop Talk, Blackness within the barbershop (perceived importance);

Safe-Space vs Brave Space (Comfort, Self – Confidence, Responsibility vs. Impunity, Alternative identities)

Participants all had a unique narrative when describing their initial barbershop experiences and the influencers that led them there. It was defined as a community space in every focus group discussion where participants elaborated on the aesthetics with a descriptive recall of their initial experiences of the barbershop that highlighted elements of Black culture. Participant 004 from the first focus group details photos of historic figures like that of Dr. Martin Luther King, Jr., W.E.B. Dubois, Muhammed Ali, Notorious B.I.G., Tupac Shakur, James Brown, and others hanging on the wall surrounding the main floor where barbers cut. Participant 002 from focus group 3, details reflections of EBONY magazine being situated in the waiting areas of barbershops for Black men to sift through to see what celebrities, models, actors, actresses, philanthropist, and the more – who looked like them – had been up to. He characterized it as a haven of Black excellence masqueraded all-about, with no set standard of conduct beyond respect for persons and everyone’s opinions no matter right nor wrong. He explains that Blackness displayed within the barbershop gained meaning for him in a way that he could translate beyond those four walls. Participant 008 from the first focus group mentions the barbershop was a community space and a place of belonging, but particular emphasis was placed on it being one for Black boys and men to congregate, discuss daily life, family matters, politics, religion, and much more.

*Like, thinking back now, first time even hearing a-a-an album, like a hi—like-like hip hop music was in the barbershop, talking about Jordans and fashion. And **these are the cornerstones to in part what makes our culture you know**...it’s important it is for a-a-a young Black man’s growth to be in that—to have that exposure. (2.0002)*



*Like, my school didn't—my school didn't highlight my Black excellence apart from Black History Month, whereas every week in the barbershop, that was the thing to do, right? Like, it was just the-the inevitable, the B—Black po-uh, you know, politicians walked in, Black teachers, Black, you know, doctors or whatever. And little did you know that they were—what their positions were because we were all normalized to get a haircut. Like, at the center of it all, it was just to get a haircut. And here it is. **You're sitting next to someone who, you know, i-is-is ingrained in your community...** (2.001)*

Participant 001 from the second focus group went so far to distinguish that the barbershop was a community space not because of its location in proximity to those around it, but because of the purpose it served for those both near and far. Many of the participants gave comparison of the barbershop's role and vitality in the community for Black men to the likes of the Black church, namely with denominations of Baptist, Primitive Baptist, Christian Methodist Episcopal, or non-denomination altogether.

*Um, so, you know, that was my earliest memories of really just being in barbershop and, and similar to \_\_\_\_, and just kind of understanding **that was a place where, um, men gathered, men belonged.** Uh, but most importantly, right, **it probably is the only place outside of church, um, you know, growing up in-in church, and-and seeing deacons talk where you actually saw Black men having, um, intimate conversations.** (1.002)*

*But, you know, it will be a beautiful thing, right, um, **to kind of see the barbershop taking, you know, a place—the place of the churches in the civil rights movement...** Thinking—getting people to think critically about social justice, and social justice issues, right. I-I think that the barbershop and barbers definitely can take on that responsibility. (3.002)*

In addition to the barbershop comparisons with the church, participants elaborated on the protective factors of the barbershop from a social engagement perspective, particularly its influence on how it complements the grooming process of clients. It's important to note that participants believed that the social aspect of the barbershop is also what allows the barbershop to repurpose itself for those who need it from strictly a place of grooming to a place of social

development for Black boys and men. Thereby, the barbershop is multipurposed for what each individual client may need at a place and time, particularly a refuge for those needing therapy in a non-traditional sense that more closely aligns with cultural practices in a way Black men can appreciate. Of importance, the barbershop is largely a method of therapy they can appreciate without the stigmas associated with being traditional therapy or having a licensed therapist intentioned for mental health maintenance or illness treatment in an informal healthcare environment.

*I-I think there has always been a **social component to the barbershop that has maintained throughout time**. Um, whether it was, again, not only a place of grooming, but is a place you can-can have those conversations. **They can have conversations that they'll seek having with only other black men**. (3.001)*

*But just from a **social aspect, and the benefits that it has, you know, like you said, having that safe space it's a-it's a form of, uh, therapy to a degree**, um, that we likely are-are missing that we probably need in our generation more than ever. (3.003)*

Participant 002 in the first and third focus group spoke in-depth about the barbershop being a ritualistic experience for them, akin to that of most Black families during the early 90's as it related to church. Moreover, participants built this working concept of ritualistic or habitual visitation to their community barbershop over the course of years, and how important and spiritual a bond it is to have a person "playing in your head" all the while discussing your most intimate thoughts and vulnerabilities that you otherwise wouldn't unveil beyond the barbering chair. Collectively, among participants, regardless of how the barbershop was viewed from a cultural perspective, it was agreed that vulnerability is perhaps one of the greatest attributes of the barbershop setting as it's one of the only places informally that a Black man can go and be seen and accepted for who he is without having to earn it.

*Um, I think it is also one of the things that I've explored in my, you know, **my ritual of getting my haircut every week is that the barbershop is also a place of extreme vulnerability** too, right. (3.002)*

*Uh, for me, uh, growin' up on the South Side of Chicago, it's like a ritual. Like, I went every week [laughter]. Like, I had almost, like, a standing appointment. Uh, it's, uh—I'm the youngest of five kids, so three brothers. We always went every Thursday at 7:00. I have no idea why we chose 7:00, **but that was our time**. Um, **and so it was line up one week and cut on the next week, but it was, like, a whole ritual for us every week**. (1.002)*

*...you know, how you look correlates with your depression and anxiety at times, you know? If I'm not looking great, um, I don't wanna go outside. I don't wanna interact. **And I feel like the barbershop definitely helps with making me feel more whole, making me feel seen, you know?** (2.0003)*

Another code arose from this dialogue of being seen and the concept of vulnerability, which is a well-known concept that is closely intertwined with the barbershop itself: Barbershop talk. Participants began to speak on the ways that “barbershop talk” has gained this bad reputation as being largely a framework for derogatory talk; however, while some aligned their beliefs with this notion, others refuted it partially or entirely, adding that it is in the ability to freely express yourself where freedom of speech is realized, where safety is found, and vulnerability is propelled forward. This belief in barbershop talk as a practice of vulnerability and its sacred elements is further explained by participant 1.003 in his explanation of how swiftly the conversation shifts if a woman is present or if there's someone present that isn't an obvious reflection of Black masculinity that the majority can readily identify in a split second upon entering the barbershop setting. Participant 1.003 discuss three components of barbershop talk and the cultural reactions to varying alternative identities within the barbershop as an influence of the flow and directionality of conversation. In addition, he speaks to how barbershop talk can

be held accountable to ensure what's being said is of substance or at the very least productive and logical.

*..open, exaggerative, and code switching... open because the conversation, like we've all said, was—it—noth—there was—**there was very few things said that was taboo.** There was a lot that was gonna be on the table on full display. Exaggerative because brothers would lie... And code switching, like it has been said, that, **when females enter the barbershop—Like, we-we talk one way when they're in our presence, and we talk another way when they're not.** (1.003)*

*..people actually thought about the stuff that-that was comin' outta their mouths because, if they didn't, then he [the barber] was gon say somethin' to 'em. If you would be saying something wrong the conversation would shift from being the barbershop talk to being, "Bro, what you talkin' 'bout? Don't make no sense, and this is why it don't make no sense." (2.004)*

Building upon this idea of vulnerability and sacredness that is a haircut, as participants describe it, participants all conceptualized the barbershop as being either a safe-space or a brave-space. Both largely stemming from this notion of “barbershop talk”, the social implications the barbershop has on how one sees themselves, and the community around them. Moreover, participants in the third focus group spoke more closely to how the barbershop was more freeing as they had no obligation to it and no responsibilities tied to them being there that dictated their worth or value as a man. It was conveyed that a common challenge for Black men is feeling the constant need to prove their worth both in the world and within the home and lacking in either realm is to discredit one’s manhood either partially or entirely. With this dialogue, participant two from the third focus group aligns this notion of freedom with dreaming and how liberating a feeling it is to be seen in your complexities and to step outside of reality for a moment to simply dream.

*So, you know, um, usually when we sit down and we talk as men, you know, we usually talk about our families, and-and how difficult sometimes it is to navigate, you know,*

*responsibilities at home or, you know, ones that we love, you know, while also trying to maintain our own sanity at—at the same time. But most importantly, you know, pursue dreams. I think that the barbershop is the ultimate embodiment of black male dreaming. Um, because it is a space where, you know, I've heard the dreams of other black men and, you know, uh, supported it. But also, they've heard my dreams. (3.002)*

In this regard, participants all agreed that the barbershop was *safe* in each focus group through the context of community and belonging for Black men. However, the theme of a *brave space* arose when discussing the limitations of the barbershop as being solely a space of safety, to which a few participants detailed their experience with the barbershop as being somewhat traumatic. Though, admittedly, it served a useful purpose in how they navigated their external environments (friend-groups, family, the church, and community-members). This is where the theme of *alternative identities* arose as a code in the study. Here, safety was akin to comfort from one perspective, and bravery was akin to one's willfulness to engage or simply show up physically in that space as someone you're not to gain insight on something you don't identify with – with all intentions of mirroring such observed behaviors - for the sake of social safety.

*..I'm a black cis gender gay man. Uh, so I can tell you for me growing up I had a love-hate relationship with the barbershop. One, I hated it because I felt like I was not a part. I felt like certain comments, certain things that were said was never to let me feel a part of it but ostracized me. (3.001)*

*...which caused that love part of it, the barbershop is where I learned characteristics to be passable where no matter what setting I'm in, if I walk like this, if I talk like this, nobody will bother me. So, it was the perfect training camp for me to perfect being, again, what I saw, and what they valued as being a man. So, that when I showed up in other spaces, and I could be that man, and not be, again, ostracized. (3.001)*

### Theme 2: Personal influencers of the barbershop culture

Related codes: Barbers (Value, Rapport, Barbers, and genders); Women as influencers (maternal contribution to the barbershop); Men as influencers

When discussing barbers and their influence over the client experience and barbershop culture, participants didn't identify barbers as being a monolith, but explained that the culture is dependent upon what sort of atmosphere the barbers or owners of the barbershop permit.

Participant 3.002 explains that while barbers may be therapeutic in most cases in terms of presence and facilitation of dialogue – if actively engaged in barbershop talk at all –they can also serve as inflammatory to the barbershop culture and consequently exacerbate mental health by forcing client's identities into a monolithic bubble within the barbershop. As a result, while the barbershop may from a general sense be liberating in conversation, that liberation largely pertains to those who fit within the more socially acceptable gender expressions and identities, namely those aligning themselves as cis gendered heterosexual men.

Regardless of the specific barbershop culture, the value of the barber to the client cannot be understated. Participant 3.002 characterizes the barber as being the anchor of the barbershop, but also for the ways in which a Black man identifies himself and finds community in that identity. The participants of the third focus group speak to the rapport that is built within the barbershop between barbers and clients, and how engaging it is to share their lived experiences as clients, while also listening to the experiences of the barbers themselves in a way that humanizes the Black male experience beyond a haircut or building. Here, barbers are characterized as being therapists, but also human beings navigating their own life's journey. As a plus, participant 2.001 states that barbers naturally have more leverage regarding orchestrating the culture, as their clientele is largely based on who they're willing to serve or permit access.

*So, I think the **barber plays a significant role, believe it or not.** And maybe they don't feel like they control the narrative, but I think-I think they can if you-if you kind of orchestrate the conversation. Now, obviously, you gonna have people walking in, you know? You're gonna have just people feeling like they need to say what they need to say, but I think if you play it right, **the-culture - around who you bring in - can change.** (2.001)*

*...with my barber like, you know, I-I also notice and can identify that **he's struggling with some of the same things I'm struggling with.** (3.002)*

*...because of his, you know, uh, the choices he's made, you know, to become a husband and a father early on. He's further ahead than I am. Um, and-and I definitely, you know, feel solace in that and peace in that. Um, but I also think that, again, you know, the barber should, and **any good barbershop worth its salt, right, will find a way to navigate these conversations in a way that's empowering.** (3.002)*

Building on this notion of the barber having a significant role in controlling the narratives that exist within the barbershop and how people experience it, the critique arose with the third focus group on how barbers can be grossly problematic and a point of contention for clients, regardless of his or her skillset. Some of the jargon used in the barbershop is derogatory, particularly when speaking about women, and a myriad of factors influence the client's positioning in life and one's willingness to tolerate certain language and thoughts of the barber at the expense of a quality haircut. However, what was agreed upon by all participants is that culture plays a huge role in how the barbershop is experienced, specifically what is allowed to be discussed and how respect for persons is enforced. Participant 7.001 mentions his experience being from East Flatbush, a Caribbean community in Brooklyn, New York that is less tolerable of disrespect in any setting, much less against women within the barbershop.

*We never used language like bitches or anything like that. That was just not in our vocabulary. **And my barber, an older guy, woulda smack me in the back of the head if I did it.** Um, but we spoke about the things that affected our communities and what it was to be a man and-and all of that...We would talk about everything. (1.007)*

*...the barbers also can be, you know, um—**they can also be sources of, you know, of-of contention as well, and conflict in a barbershop,** you know...but a good barber, you know, one who is really passionate about the world and the way he sees it. But also **open to constructive criticism,** right, and that free exchange of dialogue going back to **that piece on vulnerability can really, you know, set the-set the tone,** not just for interactions one-on-one, but also for the whole shop. (3.002)*

As it was discussed, participants in each group identified that certain conduct and dialogue within the barbershop setting can be problematic and that much of the barbershop culture caters to a particular subgroup of Black male identity; however, much was attributed to women as contributors to the barbershop and how they – when operating as barbers – also face unique challenges to integrate themselves into the barbershop culture. Participants all reflected on their initial introduction to the barbershop as children, where many attributed their maternal influence as being a driver for their experiences early-on or their father's, and that much of the initial visits to the barbershop were less about getting haircuts but were leveraged as a community resource for single Black mothers to ensure their sons had some element of paternal influence in their lives. Purposed for this study, emphasis will be placed on the value of women within the barbershop setting, not as a bystander awaiting their child to finish their haircut, but as barber facilitating the haircuts and dialogue in a culturally sensitive way. Participant 1.001 found it interesting when others in his focus group referred to code-switching being enacted whenever a woman presented in the barbershop setting both announced and unannounced.

This shock was due to him having had a female-barber in high-school, which he discovered due to him having had long hair at the time and stumbling into a barbershop in pursuit of a person able to braid hair, to which she stated she could both cut and braid his hair. However, his description of her role in the barbershop setting and even the rapport built between the two was eye-opening. He characterizes this woman, being Jamaican, as having assimilated herself within the culture where he mentions witnessing shifts in conversation from the men due to her presence, which the others in the focus group defined as code-switching. Participant 1.001 then goes on to elaborate on her role, and how once she received the trust as being a member of



this barbering community, she then began to challenge the narratives that existed therein, particularly with how conversations were being had, the verbiage being used, and the purpose behind many culturally practiced hairstyles and ideas for Black boys and men in the barbershop to explore.

*...when we—she first came in, people didn't wanna h-have certain conversations. So she would bring up the conversation...She would ask them, "Oh, did you get any new girls last night? ..so it seemed like in the beginning, she tried to assimilate herself to what she thought was the barbershop lifestyle so that she could feel accepted, which, I guess, ended up working. But then, in turn, when she was accepted, she changed everything. (1.001)*

*"Oh, I got—you—oh, how m-how many girls you got?" Oh, I got these many bitches." "Oh, why they gotta be bitches?" Now, the conversations are switching. It was, once, a, "Oh, we're a community." Now, it's, uh, I'm educating you. (1.004)*

*She was one of the first, like—to where-to where <Name> characterized his barber as to who asked him questions and-and peered in... I think she made that a little more graceful [the barber], I guess, that-that process, um, into, I guess, becoming a man because, again, she-she forced a lotta conversations with me that a lotta men would not have, early on. (1.007)*

In contrast to women's influence on participant's introduction into the barbershop, namely for grooming and/or to provide an element of paternal influence that perhaps is lacking as a single mother, there was an identified paternal influence as a primary contributor to one's barbershop introduction made by participants who identified themselves as coming from a two-parent household. Participants 3.003, 3.001, 1.001 each recall their initial experiences were largely influenced by their fathers or a father-figure, where it was a ritual held between them and the respective person as a means of cultivating manhood and facilitating a bonding experience. Additionally, participant 1.001 goes further to say that his barber was his best friend's dad, whom he was able to receive free haircuts for the entirety of his childhood as a result. Participant

3.002 details his experience as being opposite of this, in that he was a foster child taken in by a foster father who was a minister by training; however, much of his learning experiences on manhood and masculinity occurred in college or throughout various instance in life by observing other Black men in various settings such as the barbershop.

*Like the-the barbershop, you know, for those who didn't really grow up with male father figures like myself **it provides that glimpse into what black masculinity looks like**. Um, and I think, you know, now as I'm growing in, and I'm growing into an older man, but still having some of those challenges of what black masculinity, um, you know, and things like marriage, and eventually fatherhood look like. You know, **I look to my barber, um, you know, as a source of counsel, you know.** (3.002)*

### Theme 3: Mental Health and the barbershop

Related codes: Mental Health Defined by Clients (related stigmas, religion, spirituality, beliefs, hypermasculinity, homophobia); Navigating Trauma through the barbershop; Therapy (Therapy experiences)

Within this theme, participants began to explore this concept of mental health and what it means to them. Many participants align their understanding of mental health with participant 3.002's definition of mental health as being one's ability to exercise self-awareness of one's cognitive and behavioral health. Participant 3.001 built upon this definition by adding that boundaries are a core component to how he assesses his state of mental health by focusing on where the line must be drawn to discern how he's to interact with his environment and how he wishes for his environment to engage with him. In addition to this, it brought to attention amongst the group that various stigmas must also be tackled head-on, even if they originate from concepts or places Black people historically revere as a culture: Church. Participant 3.001 details that the church is the one thing that has been a pillar for us in the Black community but also a hindrance to building better mental health across our communities. He uses language commonly

used in moments of despair within the Black community as it pertains to faith and meeting challenges, “We go to God, and pray for this. You don’t need to go to somebody else. He can do this. God be—uh, leave it all to him.” Others proceed to agree and state that while faith and a belief in God is important, it’s equally important to utilize the resources God has made available to us in therapy and various types of therapy services.

*While it is okay to implement a practice of faith, we also have to use logic, um, and say that, “Listen, while God is able, of course, to do whatever-whatever we put to him. **We also have to do the work.** Faith without work is dead.” So, we have to make sure that okay, there are counselors here for a reason. (3.001)*

Another barrier identified by the participants is the hypermasculinity that is generally found in the barbershop, along with blatant homophobia. Participant 3.001 breaks down how in order to move the needle forward in the barbershop, it’s imperative to hold barbers accountable for upholding a safe and inclusive space for all Black men.

*I had a conversation with—in a barbershop a couple months ago about, you know, about homosexuality and, you know, same sex scenes, right. And, you know, I-I went back and forth with my barber about, “**Listen, you know, this is the way that the world is. This is the way that the world has always been, right.** (3.001)*

*Um, I also saw the **barbershop as a space where hypermasculinity also thrives** within that space, right. Um, you know, you usually get the chest beating contest between men, you know. Excuse the expression when they’re-when they’re talking shit about, you know, um, anything from sports, to women, to politics, right. I mean, **this is where kind of like, you know, it’s, uh, almost like a war between men to demonstrate who’s the smartest, who’s the baddest, who’s the coolest, right.** Um, and I think that, you know, those things also exist within the barbershop. (3.002)*

In focus group three, gender identities were conveyed by participants following a dialogue over the various gender identities and expressions that exists within the barbershop. There was a great deal of emphasis on being intentional in characterizing the barbershop as a safe space and highlighting the need to differentiate it as a brave space for those whose identities

wouldn't allow for inclusion safely within the barbershop. While participants in the group expressed that our generation has moved a bit closer to inclusion in the barbershop for Black men than the generations before us, what's also evident is how critically important it is for barbers to set the tone to ensure patrons are inclusive and forward thinking in how they navigate this space, because these spaces and barbershops exist, as participant 3.001 recalled vividly,

*So, I went to a barbershop. I don't know if y'all remember it was in Bankhead, All Flavors. And it was the most jaw dropping thing I'd ever seen in my life. **Here was very open, very flamboyant cis gender, gay men who were working alongside heterosexual, cis gendered black men. In, uh, peace, and harmony, cracking jokes.** It-it was-it was no drama. So, for me I was like, "Wait a minute. So, you-you-you feel comfortable here with heels on? Like, "It ain't no-it ain't no issue?" And even the owner was straight off like, No. You come here to do hair. I don't-I don't care about how you move—you do your hair—you do good. You do good by my customers. We good. (3.001)*

This was transformative for the participant and the individuals in the group because it gave a nod to alternative identities that exists within this focus group, but also served as an anecdote for a real-life application of how to exemplify a safe space within the barbershop setting and how protective it truly is for all when inclusion is made a priority for all persons, their gender identities, and expressions alike as expressed by participant 3.002. Participants summarized that the barbershop is a setting where progress within the community can be made, especially in terms of inclusion and cultivating safe spaces for all Black men, because aside from our differences in gender identities and expressions, they come from the same place and are more alike than they are different.

*So, for me I think, and it was funny 'cause I remember seeing younger guys like in high school who would come to get their hair done. I think my—and at first, of course, my experience thinking like, "You too young to be in here to see this." But the truth of the matter is they needed to be in there at that age. Because at least there is where they found safety and a sense of community where I didn't at that age. (3.001)*

When discussing the theme of trauma, which was brought about on the heels of discussing experiences of alternative identities and personal experiences with mental health, participant 2.002 mentions how his trauma was less about his identity, but more so about the incarceration of his father when he was a child and shared traumas between himself and his peers. He details that to prevent himself from worrying so much about his father's absence, he instead supplemented the grieving moments with sports and being active in various places in the community, one of which was the barbershop where he and his friends found a haven.

*There was a lotta people in my hood that was really in bad situation and **was really just goin' to the barbershop to get a cut, not knowin' that that was really the place that saved they life in that-in that point of time, simply because of the sense of neutrality that was in that space.** (2.002)*

Participant 2.005 discusses that a barrier for Black men is largely American culture and society that doesn't allow us the freedom to grieve, to hurt, to feel, or to be right about their feelings, even within spaces that are designed to understand even the biggest issues of life, such as death and loss. He speaks to his friend's experience at a school of Theology where he suffered the loss of his grandmother, a school rooted in the Christian faith that he felt should've been more understanding of the stages of grief but would only reach out to him to inquire on his timeline of returning to work. He stresses that American society is so rooted in productivity where pausing to feel anything that contradicts productivity is seen as bad, and therefore has its own mental health implications which we all tend to fall victim of in some capacity.

Building upon this were references within the focus groups of other spaces that have been therapeutic for Black men with a traumatic past and the benefits these sorts of spaces have had on those battling issues of identity, mental health, and the more. All participants of each group acknowledged that they've experienced mental health challenges ranging from anxiety,

depression, and/or anger. Though each mental health event was a stated commonality across all groups that each participant experienced, less common among participants were the resources made available to each of them to manage their mental health events or experiences. Protective factors identified were spaces of majority Black men, such as historically Black colleges and universities, where applicable; and therapy groups designed for men dealing with trauma, when available and utilized. Moreover, it was identified that given how many barbershops tend to exist within the Black community, in nearly as much as a frequency as churches are on every other corner of the South, the barbershop could be better utilized for its members beyond the context of the barbershop to combat the mental health disparities commonly experienced.

*Nobody in the barbershop is actually talking about, "Hey, you know, I had a suicidal ideation 10 years ago, right." Um, nobody's talking about, "Well, you know what, um, you know, I was dealing with depression, right," or, "I might've had a manic episode." But in some ways we see it, right. Um, even when you step outside the barbershop, **in the west end**, um, you know, where I get my haircut, **one of the things that we see is that black men are disproportionately on our streets dealing with different bouts of mental illness, right.** (3.003)*

*I just recently saw that in my travels in California, right. **I-I think that black men, um, you know, uh, just from optics tend to deal with these issues a lot more. Um, but for me I've always been blessed in that sense where I've always had a supportive group of black men, um, you know. I went to all black male school, so I had that sense of solidarity there.** (3.004)*

Many of the participants expressed that they were in therapy for various reasons over the course of their lifetime, some seeing therapy as a permanent placement in their lives, others seeing therapy through various support systems via family, friends, sports, women, and risky behaviors. Those who leveraged the barbershop to be more of a place of refuge and therapy state that they did so as it was the first place next to the church that felt *comfortable* in a therapeutic sense, if from only a haircut. But particular importance was placed on the culture, conversation,

and shared experience of Blackness that commonly exists within Black barbershops, all serving as an organic and culturally accepted opportunity to experience themselves through community engagement of other Black boys and men. Participant 3.003 states that therapy was a game-changer for him, because he was provided a myriad of additional resources for his specific needs due to his therapists' resources. He ended by questioning where he would be had he never chosen to go to therapy at all, where prior to engaging, it wasn't a normalized concept and the resources had never been identified by him or others within his network, let alone made available.

*And it was not until I got to a space where I was like, "Okay. **Only thing I can think of is therapy, and counseling.**" And then from there, that person was able to open the door to numerous resources that I could take advantage of. But if I had not thought to do that, I honestly don't know what space I-I would've been in. (3.003)*

Participants closed their discussion of therapy by stating how accountability stands at the forefront of effective therapy practices and becomes easier when the greater number of Black men are also walking that line with them, along with their community. One participant states that emotional and mental maturity also plays a role, which can be refined in therapy or spaces where accountability is normalized and trusted. Participant 1.004 elaborates on his experiences in therapy and gives thought as to why the barbershop may not be the most ideal space for mental health conversations for *all* men, and explains how his traumatic upbringing with his father is what influences his decision to have a Black woman as a therapist, though he's only ever had men as his barbers.

*...women tend to be nurturers. Men are providers. They always talk about a mother's love being unconditional. **So the thing that's held me back, for years, from goin' to therapy was the feeling that I'll be judged.** And it feels like, if I go to a woman, that judgment will be less severe, more understanding, and more nurturing rather than looking at me with disapproval, which is what I would get from my father. (1.004)*

When disclosing this perspective, other participants chimed in and began to make a loose definition of what therapy is for them. This came after discussing how the stigmas described in other themes - as it relates to mental health - may serve to complicate one's willingness to seek help when they need it. All participants in the three focus groups, except for two, identified therapy as being any healthy coping mechanism that serves a purpose to allow one to feel seen, heard, and justified in their experience in the capacity that they need. While the theme of the barbershop guides this study, participants state the belief that there are many avenues for therapy to be achieved beyond the traditional sense, and because many Black men face so many barriers to mental health care, there's a need to be innovative - in safe manner - as it pertains to a group of people that have largely depended on their resourcefulness to survive. As such, the participants voice that the barbershop can fill this need, but it needs to be repurposed and more intentional in doing so.

*Theme 4: Repurposing the barbershop for Black men's mental health*

Codes: Critique of current uses (physical health screenings); Black agency (community involvement and responsibilities)

Critiques of the current uses of the barbershop were nuanced in ways. Participants voice their understanding of how the usual health screenings may be done, if at all, in the barbershop in terms of blood pressure readings, but most state that even still, health isn't routinely assessed. Participant 3.003 critiques the idea that barbershops don't already have these resources, stating that the barbershop's clientele is vast in nature and in many places, particularly within Atlanta, there are several clients who are specialist in some health-related field, but they're just not being utilized in the barbershop for their expertise. And so, the charge should be on the barbers of these shops to make a better initiative of creating these opportunities.



*And I-I think it's just a matter of intention and being a little bit more aggressive maybe about it from the barber sample because it's not that they don't have connections or resources. **Because these very same doctors that are working in these offices are getting their hair cut by these gentlemen. So, it's just a matter of utilizing the resources they have available to them to make it easier.** (3.003)*

It was also described by participants that there needs to Black agency when it comes to matters of health-related issues, including mental health. Participant 3.002, speaks to how commonly Black people have a mental illness and slip through the cracks, and because of the stigmas that exist, it's often glossed over because to care for that person would mean we would have to acknowledge their reality, but also our own as a community and society within America in how we perpetuate these ideologies, barriers, and stigmas associated with mental health care. He also adds that many Black men don't utilize resources for our general health much less our mental health, and that behavior must also change as new innovations are introduced.

*...normalize it, but also seek solutions to make it okay that people seek treatment, that people take care of themselves. **And I'm not just talking about mental health, but most of us don't even go to the doctor as black people.** You know, I've had, uh, three men and—three black men in my family die in their 50s because of colon cancer. Something that is preventable, right. Um, so **it's not just about talking about mental health, but overall health too.** (3.002)*

Lastly, participants in the third group, 3.001, 3.002, and 3.003, brought much of the overarching themes of the study home when questioning what we as a community have done thus far within the barbershop setting as it pertains to mental health and where we could potentially go from here.

*Traditionally, **what we've seen in barbershop settings is blood pressure screenings and what have you, but no one actually talks about all of the evils that may happen, you know, behind closed doors. And how do we actually create a space that addresses that -- that is not a psychiatric ward, right? That isn't a hospital settin', that isn't a doctor's office, or what have you? But how do we go into the community and meet people where they are in communities that they readily identify in and spaces that they most feel safe? A***

***repurposing of the barbershop is necessary and must be intentional in its mental health objectives for our community. (3.003)***

*I'm constantly grappling-grappling with as a black man who has a particular space, and a particular duty is, are we having these conversations about us in the broader society as it pertains to what it means to be a black man. **How do black men effectively speak out about mental health**, childhood traumas, right, in ways that then allow us to influence the barbershop? I think that that's the larger question, right. (3.001)*

***And this is the space where the barbershop, our churches, our community centers, our fraternities, our sororities, right, all of our organizations need to be having these critical conversations. And at the top of that list is our-is our mental health, right. Because I think it's too much of a responsibility to take it from the barbershop, and then say, "Well, here's a responsibility for the barbershops to the rest of the community," right. (3.002)***

## **DISCUSSION**

Throughout this study, participants identified the significance of the barbershop as a cultural space for Black men and alluded to the ways in which it serves as a haven for them as well. Throughout the study, what is apparent is that while the barbershop is a critical aspect for the exploration and cultivation of Black male identity, it often serves as a biased space that honors the identities of cis-gendered heterosexual men, though there are evolving barbershops for Black men that have been found to be more progressive and therefore inclusive of the plurality of gender identities and expressions, per the participant's personal accounts. How men identify within these spaces largely influences how they view one another and to what extent they find comfort and safety within the Black male experience. Most notably, this study highlights that the Black male experience is far from monolithic, and while there may be variations in experiences, there also exists many commonalities amongst the complexities.

Per the participant's accounts, how they identify as Black men is largely facilitated by their positive or negative experiences with other Black men, along with their upbringing,

socioeconomic status, and built environment. In this regard, identity can be influenced both positively and negatively given the experience individuals have within shared community spaces like the barbershop, church, and other spaces frequented by persons of similar cultural and social identities. For this reason, while there exists a myriad of variables that influence the mental health status of Black men, a persistent barrier to addressing matters of mental health within this target population is the lack of safety and trust felt in the traditional modalities such issues are usually explored: doctor's office, mental health hospital, traditional therapist's office, etc. What is suggested by this study is that there must exist a level of agency among Black men within the Black community to first normalize these conversations surrounding mental health and its associated stigmas therein, while being mindful to leverage these conversations in spaces deemed safe for Black men and by Black men, such as the barbershop.

The theme of *safe space* was produced most in each focus group discussion. The idea of the barbershop being a safe space has much to do with its cultural influence, but isn't limited to Black men, as evidenced by the recalled experiences shared by participants when within the barbershop setting. In addition, critique was raised by this notion of safe spaces that historically exists simultaneously within the Black community such as with the church, where much of the critique was highlighted due to the lack of evolution the church has made in congruence with the broader reaches of society. In this instance, the barbershop – being a more social atmosphere accommodating fluid dialogue – has been able to keep pace relatively well in comparison. Additionally, there naturally exists a greater concentration of Black men within the barbershop setting than compared to other community spaces, which is to suggest that the protective component of the barbershop is the collection of shared experiences that coexist within a setting of those readily identifying with one another. This is particularly in a way that feels more

inclusive and less judgmental, specifically for those who readily identify with a heteronormative, cis-gendered framework. Additionally, it was identified by participants that while the barbershop space is deemed a safe space from a traditional sense, this concept is not limited to Black male identities alone but extends to alternative identities who first assimilate or *blend* into the barbershop culture to a point of acceptance, then slowly integrate more thought-provoking concepts and ideologies in a transformative way once trust has been established. Safety, in its loose definitions by participants, is closely related to comfort and one's sense of belonging; however, where there lacks comfort and belonging, and safety is questioned, the barbershop is leveraged in a different light, alternating from a place of safety to a place of bravery.

Introducing themes of alternative identities within the barbershop, participants explored the influence women have had as contributors to the barbershop setting and culture, participant's collective introduction to the barbershop, and their influence over their mental health experiences in the role of cognitive or behavioral therapist when seeking mental health treatments. A few commonalities were identified among participant's assessment of the influence Black women have on their relationship with the barbershop and their influence on the transformative nature the barbershop may involve. It was found that women as barbers are a vital component to the barbershop environment when engaging the barbershop initially as an observer, and slowly integrating the culture by first accepting what the culture of the barbershop they're in represents, then allowing themselves the opportunity to engage the barbershop vis a vis the client. It was found that through the interpersonal dialogue that happens while getting a haircut, this time allows for clients to foster an identity with barbers, regardless of gender, to build a rapport and a space for which clients and barbers can navigate the culture of the barbershop at the individual

level. The same can be said for alternative identities of Black men that don't align with the traditional cis-gendered heterosexual Black male framework.

For Black men with alternative identities, though assimilation is less of an objective internally, more emphasis is placed on leveraging the barbershop as a brave space to find a sense of safety in the broader aspects of society that may be less protective or accepting of alternative identities than even the barbershop. Here, we invite the notion of a triple consciousness that may exist for Black men who identify themselves with alternative identities, though the study itself only assessed perspectives of those identifying as cis-gendered gay or bisexual Black men. This triple consciousness is characterized by participant exploration of their identities as being American from the sense of nationality and what this means when understanding their Blackness, but also as Black men who identify as gay or bisexual when engaging an otherwise predominately cis-gendered heteronormative culture that is the barbershop, where they hope to gain a better understanding of more culturally and socially acceptable presentations of masculinity, even if it doesn't mirror what's organic to them. Their ability to navigate between identities serves as a protective feature to ensure their safety socially, by leveraging the barbershop as a brave space until comfortable and ready to disclose their gender identity and sexual orientations to themselves, others, or both.

The hallmark of therapeutic spaces is one in which individuals can come as they are into a space and feel seen, heard, and accepted in a way deemed safe by the individual him or herself. However, it's also important to highlight that even the most therapeutic spaces require an element of bravery to confront the realities of one's experience, traumatic or otherwise, in the face of the stigmas that may exist in the very action of tending to one's mental health in such a capacity that may not be ideal or comfortable, initially. While participants do acknowledge that

the barbershop is a space of both safety and bravery in various capacities for everyone, it has also been acknowledged that this space is safe pending the personnel within the setting and their intention to make it one that is both safe and therapeutic.

Perspectives of Black men with alternative identities should be explored further to gauge the best approaches to ensure that traditional Black male occupied spaces - such as the barbershop - are utilized in a way of intention towards the better making of boys and men. In addition, it is imperative that in making the barbershop space more inclusive, particularly in the cause of leveraging this space to explore mental health within this population, that innovative ideas be considered with direct input and reflection of the identities of all persons who utilize this space for its therapeutic services, be it for barbering services, barbershop talk, or simply a space of refuge. Adding to this, the barbershop must subscribe to a sense of agency related to mental health services as commonly done with routine health screenings such as seen for hypertension, diabetes, and prostate cancer. In this agency, barbers, barbershop owners, and clients should maintain an internal network identifying the resources that exist within the barbershop community along with those that exist externally that may serve as a viable resource to repurpose safe spaces such as this for mental health services in toto for Black men.

## Chapter 4: Public Health Implications

Leveraging safe spaces within communities for the delivery of health services is both patient and community centered. As mental health continues to plague Black men, with 13.4 % of the U.S. population identifying as Black or African American, of which over 16% report having had a mental illness in the past year, there exists a growing need to identify innovative approaches to address mental health within this population (MHA, 2023). Moreover, taking into consideration the stigmas that exist given the historical relationship between the Black community and healthcare industries within the United States as it pertains to medical mistrust, identifying ways to empower communities to deliver culturally sensitive care with consideration of themselves is critical. This may entail trainings for barbershop owners and barbers within the barbershop to conduct needs-based assessments to first identify the mental health needs and support that exist within the barbershop setting and culture, along with identifying the gaps in that support.

Additionally, this study may help to understand the knowledge from literature and personal accounts of how safe spaces can be utilized to address matters of mental health in communities of color across the United States and may also translate to communities in international settings. Leveraging the barbershop setting as a safe space to employ mental health services for Black men may not only prove to combat the mental health epidemic that currently exists within the United States, but when done with intention, it may also foster more communal bonds between cis-gendered heterosexual Black men and Black men with alternative identities to foster a sense of safety, understanding, belonging, and shared identity amongst one another.

A broad example of this is seen with the Confess Project, a national organization supporting local chapters that train barbers and stylist to become mental health advocates, with

the mission to build awareness and break stigmas around mental health within the Black community (CFA, 2019). In partnership with Harvard University, a study was also conducted under The Confess Project of America with aims to examine the lives of barbers of color in various American barbershops with a focus on major themes including life as a barber, community interactions, mental health, suicide prevention, domestic and community violence, COVID-19, and racial tensions in America (Gelzhiser & Lewis, n.d.). This study leverages the barbershop setting with a centering on the experience of the barbers and seeks to evaluate the benefit of employing barbers as mental health advocates. More specifically, it seeks to evaluate how training barbers to be mental health specialist is not only protective for their mental health and wellbeing, but their community's as well.

### **Strengths and Limitations**

Strengths of this study were highlighted in participant's responses to how therapeutic an environment the focus group discussions were, particularly having had the opportunity to navigate a space with other Black men of shared identities that allowed for an intimate conversation on Black men's mental health. Additionally, the perspective of alternative identities proved significant in that they gave an in-depth perspective of how the barbershop may not perpetuate a safe space for *all*, but rather a brave space for some. Additionally, the nature of these conversations and the intention of the study being to explore attitudes and perceptions of how the barbershop can be leveraged to address mental health matters for Black men allowed for a more inductive approach to the research. As a result, participants had a greater range of autonomy in the directionality of this study, along with the associated themes generated.

Limitations of this study were evidenced by participant attrition, largely due to scheduling inconvenience and the time constraints of the study. In addition, barbers weren't



interviewed as originally hoped for as scheduling interviews between the researcher's availability and the barber's availability after-hours proved to be a barrier. Moreover, when conducting an in-person venue to host the focus group discussions, locations agreed upon between the researcher and barbershop-owners proved difficult to achieve, largely due to location, and time of days requested given participant and barber availability. As a result, zoom interface was used instead, which provided a great deal of convenience for participants and the researcher alike, but prevented the study from being conducted in within a barbershop setting to mimic the environment *barbershop shop* talk most commonly occurs.

### **Future Implications**

This study may assist barbershop owners, barbers, clients, and Black men as a collective to better understand the ways in which the barbershop and similar community spaces can be leveraged to address a number of health disparities, specifically those pertaining to mental health. In addition, this study may join a conglomerate of others that seeks to investigate the usefulness of safe spaces in navigating taboo and complex ideologies that require great cultural considerations to navigate, along with health-related issues in underserved and rural populations that are resource poor. Further studies are needed to assess ways in which safe spaces can be leveraged in a culturally sensitive manner with aims for communities to increase access to needed support systems and resources both internally and externally, with a goal of promoting self-sufficiency, empowerment, and agency over health matters of the individual and community alike.

### **Conclusion**

The barbershop serves as a cultural staple within the Black community and is characterized as a safe space, brave space, or even both depending on one's positionality in

proximity to the standard cis-gendered heteronormative culture that exists within. Various influencers contribute to the social constructs historically defined as acceptable or flawed within the barbershop, and while there have been changes in terms of the evolution of barbering and barbershop culture, there's still a great deal of repurposing and intentionality that must happen to ensure this space is inclusive and safe for all persons.

In establishing a culture of true safety, only then can significant strides be made in terms of navigating the barbershop to engage clients and barbers alike in more didactic discussions, which requires an element of vulnerability that can only exist after a thorough repurposing. Barbers should aim to set the tone for what is permitted within the barbershop in terms of conduct and dialogue, while partnerships should be established both internally within the barbershop and externally within the community to better explore complex topics relative to masculinity, Black identity, men's health, and mental health. Community members and healthcare professionals that seek to integrate themselves within this population must take into consideration their positionality as it relates to the population being served, in this case Black or African American men, to ensure that the services rendered don't compromise the cultural relevance of the barbershop itself or further ostracize an already marginalized population within a space they already deem as safe or brave.

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